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| <input checked="" type="checkbox"/> PCT/IPEA/409 IPER (PCT/IPEA/416 on front) | <input type="checkbox"/> Search Report References                                |
| <input type="checkbox"/> Annexes to 409                                       | <input type="checkbox"/> Other : _____                                           |
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## RECEIPTS FROM THE APPLICANT (other than checked above) :

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|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Base National Fee (paid or authorized to charge)                             | <input type="checkbox"/> Preliminary Amendment(s) Filed on : _____                                             |
| <input checked="" type="checkbox"/> Description                                                                  | <input type="checkbox"/> Information Disclosure Statement(s) Filed on : _____                                  |
| <input checked="" type="checkbox"/> Claims                                                                       | <input type="checkbox"/> Assignment Document                                                                   |
| <input type="checkbox"/> Words in the Drawing Figure(s)                                                          | <input type="checkbox"/> Power of Attorney/ Change of Address                                                  |
| <input type="checkbox"/> Article 19 Amendments                                                                   | <input type="checkbox"/> Substitute Specification Filed on : _____                                             |
| <input type="checkbox"/> Annexes to 409<br><input type="checkbox"/> entered <input type="checkbox"/> not entered | <input type="checkbox"/> Verified Small Status Claim<br>(if submitted after Receipt Date - Is it timely ? Y/N) |
| <input type="checkbox"/> Oath/ Declaration (executed)                                                            | <input type="checkbox"/> Other : _____                                                                         |
| <input type="checkbox"/> DNA Diskette                                                                            |                                                                                                                |

## NOTES :

35 U.S.C. 371 - Receipt of Request (PTO-1390)

Date Acceptable Oath/ Declaration Received 01-25-01

Date Complete 35 U.S.C. 371

102(c) Date

Date of Completion of DO/EO 906 - Notification of Missing 102(c) Requirements

Date of Completion of DO/EO 907 - Notification of Acceptance for 102(c) Date

Date of Completion of DO/EO 911 - Application Accepted Under 35 U.S.C. 111

Date of Completion of DO/EO 905 - Notification of Missing Requirements 02-12-01

Date of Completion of DO/EO 916 - Notification of Defective Response

Date of Completion of DO/EO 903 - Notification of Acceptance

Date of Completion of DO/EO 909 - Notification of Abandonment